

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>lw</i>	68904	9/24/02
O.I.P.E. CLASSIFIER	<i>M+V</i>	50	9/27/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>MS</i>	70303	1-23

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
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Claim	Date
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Claim	Date
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Original	
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If more than 150 claims or 10 actions  
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